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An
Essay
on
Dysentery
by
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of
Pennsylvania

Remarks on the epidemic Dysentery, which prevailed in some of the western parts of Pennsylvania, during the fall of 1819, & 1820.

The disease which has been selected, as the subject of the following Thesis, was in general, so formidable in its attacks, and so various in its symptoms, that I enter with diffidence on its history and treatment. Nor is my diffidence diminished by the consideration that I was an eye witness to its ravages, for this very circumstance causes me little more sensibly to feel my incapacity to do it justice. May I not however claim indulgence on the ground, that my observations are the result of personal experience? Such is the fact during the prevalence of the disease, the number of those attacked with it was so great, that the Physician with whom I was pursuing my studies could not possibly

attend to all who called on him. Many cases consequently devolved on me, and from these I was enabled to collect the materials of my inaugural dissertation. If the manner in which I have thrown them together be considered imperfect, I can only plead as my apology the indisputable truth, that matters of fact are more valuable in a plain dress than speculation decked with the richest ornaments of fancy.

Symptoms.

The disease came on in some cases with the usual symptoms of fever as shivering, languor, listlessness, sighing, yawning, small accelerated pulse which were speedily succeeded by great heat and thirst and occasionally by considerable anxiety, difficulty of breathing and sickness at stomach, griping, tenesmus, tenderness of the abdomen and frequent evacuations of mucus and bloody matter, the latter symptoms

characterizing the disease in its fully formed state. Often however, the affection of the bowels was the first symptom, though not generally, as I have seen several patients evidently attacked with the disease, who complained of nothing more for several days, than a great degree of languor, attended with pains in the head and loins, without any disturbance whatsoever in the alimentary canal, except a distaste for food, and on examining the pulse it was found considerably quickened, in some cases full and hard, and in others small, hard, and frequent, accompanied generally with a white tongue, sometimes a yellowish streak in its centre. In some instances the patient complained of costiveness, and occasional colic pains, about the umbilical region, a few days previous to the appearance of the Dysenteric symptoms presenting themselves, and on examination, the tongue in all such cases was considerably furred, and the pulse

quickened and hard. There were also occasional discharges of wind from the stomach.
In the commencement of the epidemic under notice, the fever was, generally speaking, synochus, but as the disease continued, and winter advanced, it appeared to put on more of the form of synocha.
In several cases the disease proved fatal in a few days, during which time the patient was considerably exhausted, and the most prominent signs of the greatest degree of debility were present, though in a number of instances, the tendancy to debility was less rapid.
Before this disease made its appearance, a fever of the bilious remittent form was prevalent, but on the appearance of this, every other prevailing then, seemed to yield its sceptre to the haughty tyrant.
Nor did its ravages end here, as many diseases which afterwards made their appearance put on more or less of its symptoms, such as an evident disturbance

in the alimentary canal, occasioning cholera morbus, bilious colic, and cholera infantum.

The duration of the disease was various, whilst some patients recovered in a few days, others were continued several weeks; and there were a few cases where the sufferers dragged out a miserable existence, and finally perished at the end of two or three weeks.

Diagnosis.

The symptoms just described are sufficient to warrant the opinion we have given to the disease, it was clearly dysentery, the fever, the gripes, pain and bloody stools which were present distinguishing it from Diarrhoea, the only form of disease with which it could possibly be confounded.

Prognosis.

A great degree of fever attended with much prostration of strength, violent tenesmus, a coldness of the extremities, sunken eye, and clammy sweat, we likewise a great increase of the powers of vision,

attended with a peculiar shining appearance and a dilatation of the pupils were in many instances the precursor of disorganization. In children convulsions often broke asunder their feeble tie to this world, and carried them off, for even when the little sufferer seemed to be getting better, a violent convulsion would supervene, and leave a period to their existence. A moderate degree of pneumonia, the symptoms occasioning high pulse and a more immediate significance. A general expectation of pain were business, as intense universal and moderate weakness, with a return of warmth to the feet and hands, were the harbingers of returning health.

Pathology.

It has been remarked that dysentery seems chiefly in the autumn, and that it is occasioned by cold or sudden vicissitude, quickly to influence health to great danger, such was the case with the disease under consideration. The months of July and

August were quite warm during the days, and the evenings, comparatively speaking, were exceedingly cold. The coverings of winter nights were necessary, from highly comfortable. A great many springs which were thought inexhaustible dried up, and in many places it was necessary to drive cattle a considerable distance to water. In what manner these circumstances operated to produce the disease, it is not easy to determine, though I am inclined to the belief that their effects were attributable to the sudden checking of the discharge from the skin, and the determination to the intestines consequent on such suppression. In this I am confirmed that I adopt the pathology given of Dysentery by Sydenham, and that with him I look on the disease as a febris introversa. There were my views when I was called to treat those cases from which my remarks are now drawn. I believe that the affection of the intestines was

a mere secondary symptom, or in the language of the great Sydenham just named, nothing more than an effort of nature to expel morbific matter. On the type of the disease I could not for a moment hesitate. It was decidedly inflammatory and of general, a fever, a cold, in the pathology that must, which was consequently, treated, and fully justified by the success which crowned my efforts.

Treatment.

I began with the lancet and unhesitatingly with the greatest freedom and boldness even in cases where the appearance of the patient, the coldness of the hands and feet, the small thready pulse, and the nervous debility might have seemed, to a sydenham school, to have forbid it. I pushed the antiphlogistic regimen to its full extent and with success. As thus affording the excellence of the antiphlogistic plan of treatment,

it is not my intention to lay down rules for the universal management of Dysentery. I confine myself to my own experience, and must therefore declare myself a decided advocate for the lancet in the disease as it was presented to me. At the same time I do not hesitate to admit that cases may occur, in which from peculiarity of season, constitution, climate and other circumstances, it would not only be found useless, but even pernicious. I repeat, that as far as my observations extend, it arrested the progress of the disease, and it appeared to do so by allaying fever, painful irritation, and producing gentle perspiration. When it was not resorted to, I have every reason to believe that the patients died from the effects of violent inflammation. Whether this opinion would have been confirmed by post mortem examinations or not, I am unable to determine, as no opportunity was afforded of pursuing my researches after the

death of the patients.

Cordies

in the commencement of the disease were of great utility. that is, on the first or second day. those. which I prescribed were twenty grains of Ipecac combined with three grains of tartarized antimony. They relieved nausea and oppression of the stomach, and sometimes plunder on the bowels. after the third day they were injurious and aggravated in many cases to bring the death of the patients. he one instance this was evidence to be the case in a very striking degree. A young woman who was attacked with the disease sent for the physician, who not being at home, was prevailed on by her friends to send for a clergyman, who acted occasionally the part of physician. He prescribed an emetic of Tart. antimony which produced such debilitating effects as to kill the patient. It was given on the third day after the commencement of the disease and

from that time her hands and feet became cold, and her death took place in twelve hours after.

Cathartics

These were particularly useful in this disease. They relieved pain during their operation on the bowels, and brought away large quantities of inspissated fæces. So effectually did they remove griping and tenesmus that in a majority of instances, I ordered purgatives every day. Then I usually contented me the sub-mur. Hydr. and Pulvis Jalapa. I generally gave of the Sub Murias Hydrargyri ten grains, and of the pulvis Jalapa half a drachm, and repeated it three times a week, giving on the intermediate days the following laxative prescription.

Take of Sulphate of Magnesia one ounce.
Senna leaves half an ounce. mix

and infuse in eight ounces of boiling water for one hour, strain and add two grains of Tartarized antimony. A tablespoonfull may be taken every

twice hour. This operated on the bowels, and at the same time, produced a determination to the surface. When this failed in producing the desired effect, I gave the two minims of Mercury combined with Opium and Ipecacuanha in the following proportions.

Take of Sub Muriate of Mercury twelve grains
Powdered Ipecacuanha twelve grains
Powdered Opium one grain and a half. mix
and divide into 24 equal parts, one to be taken every
third hour. This kept the bowels in a healthy state,
produced an alleviation of pain, and acted on the capil
lary vessels of the skin by exciting a moderate diaphoresis.

Warm bathing was highly useful, as the patients were in a majority of instances relieved thereby: it not only allayed pain, but produced a determination to the surface, after the bathing, some unremitting measures were adminstered, those usually employed were as above mentioned which generally brought

a plentiful injection. In case the first application of the warm bath was ineffectual, I ordered it to be repeated after two or three hours and the nauseating medicines continued as before. I generally found the warm bath most effectual, after two or more bleedings, when the pulse had fallen or rather its tension abated.

Opiates

Given in the commencement of the disease, seemed injurious, by increasing fever, and preventing an easy discharge of the hardened faces. they alleviated pain for a short time, but when this effect went off, the patients were much exhausted and the symptoms aggravated. But in the latter stages of the disease, when the pulse was reduced, and the bowels thoroughly evacuated, they were of the greatest utility by procuring rest and sleep, especially in those patients, who were much disturbed during the night by the urgency of the rectum. I generally exacted two grains at bed time in combination with two of Antimonial powder.

Blisters.

These were effectual remedies in many cases, especially, when the patient complained of a constant pain, with tenderness of the abdomen on pressure, and when the action was first reduced by the former remedies. I generally ordered a large blister over the abdomen, and when taken off, directed to be applied again in a few hours.

Emollient injections, as the decoction of Starch, of Flax-seed, in the proportion of half a pint of water, with the addition of fifty drops of Tincture of Opium, administered at night procured great relief, and calmed irritation of the intestines.

Sometimes the disease degenerated into a chronic form, and was very troublesome to cure. I generally found that relief was obtained by the following medicines viz. Sulphate of Zinc and Sulphate of Alum, with opiates at night, and applying a flannel roller over the abdomen, with friction. In many

instances it was necessary that the gums should be slightly affected with Mercury before the disease yielded. The following prescription was given, during the administration of the Mercury.

Take of Logwood one ounce

Colombo root two drachms

Orange peel three drachms. mix. and infuse in one quart of boiling water. a wine glassfull may be taken three times a day. In patients much debilitated by the disease. I ordered a teaspoonfull of Brandy occasionally.

With this treatment I seldom found myself fail in combating the disease. and though there were some fatal cases. I cannot but think that the number would have been infinitely greater, under any other mode of management. But one point more remains to be noticed, and though this should have been placed under the head of Pathology, we have chosen to refer it to the close of our remarks, because it is rather of a

physician. Its practical character we refer to the contagious or non-contagious nature of the disease. Cullen has reported dysentery, typhus contagiosus: dysenteria inflammatoria, mucosa vel sanguinolenta. Rush, febris febris atrox, tormina, tenesmus. In the first clause of his definition he has rather dogmatically made the bravery of contagion a chief character of the complaint. And though I am not prepared to deny the justice of doing so, I must by confession be guilty of some doubts on the subject. It is true that in other cases that appeared to be generous exposure to produce the taint of its contagious nature, a case of this kind occurred during the period to which my remarks refer. That I may not be accused of withholding any facts calculated to throw light on the subject in question, I will briefly relate one of these.

A young man being sent for the physician, he visit his sister labouring under dysentery, followed him into the sickly part of the country. He did not stay longer in the house where the physician was then prescribing

than fifteen or twenty minutes, he went home, and in two days was attacked with the disease which was subsequently extended to the rest of the family. This young man lived in a part of the country perfectly healthy and abounding with most excellent water. It was remarked in that neighbourhood that all, or the greater number of the persons who visited this family were attacked with the disease. An alarm was thereby spread abroad that the disease was contagious, which prevented many from paying attention to the sick, in consequence of which great numbers suffered. From this case two opposite inferences may be drawn viz. first, that the disease was communicated and propogated by contagion, second that the atmosphere was impregnated with its predisposing causes, and required something to excite it into action. I incline to the latter opinion, and believe that the whole family were predisposed to this form of complaint, and sickened from the operation of some exciting cause which had not before been active, but which on his return, kindled

the latent spark into a flame. Whether this opinion be correct, is not however a matter of much moment, the business of our profession is to discriminate closely between the varying symptoms of disease, to act promptly and energetically, and to relate faithfully the facts as they are presented to us. This I have endeavoured to do, and if I have failed in my attempt, I shall still retain the satisfaction arising from the consciousness of having, at least, made an effort to perform my duty.